Country

UTILITY PATENT APPLICATION TRANSMITTAL

			The state of the s				
Attorne	y Docket No.	11-244					
First Inventor or Application Identifier			HIGUCHI et al.				
Title	VIBRATION TYPE ANGULAR VELOCITY SENSOR						

Fax

(703) 707-9112

Express Mail Label No. (Only for new nonprovisional applications under 37 C.F.R.§ 1.53(b)) Commissioner for Patents 5 **APPLICATION ELEMENTS** ADDRESS TO: Mail Stop Patent Application Alexandria, VA 22313-1450 See MPEP chapter 600 concerning utility patent application contents. တ်ထ Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) ∞ Х 5. Microfiche Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission 9 2. Х Specification [Total Pages 32 6 (if applicable, all necessary) a. Computer Readable Copy -Descriptive title of the Invention b. -Cross Reference to Related Applications Paper Copy (identical to computer copy) C. -Background of the Invention Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS -Summary of the Invention -Brief Description of the Drawings X Assignment Papers (cover sheet & document(s)) -Detailed Description of the Preferred Embodiment Assignee: DENSO CORPORATION 37 C.F.R.§ 3.73(b) Statement (when there is an ower of -Claims 8 Attorney -Abstract of the Disclosure 9. English Translation Document (if applicable) X Information Disclosure Copies of IDS Drawing(s) (35 U.S.C. 113) 12 10. Total Sheets 1 Statement (IDS)/PTO-1449 Citations 1 Oath or Declaration 3 11. Total Sheets Preliminary Amendment Return Receipt Postcard (MPEP 503) (should be specifically itemized) Newly executed (original or copy) X a. 12. Small Entity Copy from a prior application (37 C.F.R. .§ 1.63 (d)) Statement(s) Statement filed in prior application, b. 13. (for continuation/divisional with Box 16 completed (PTO/SB/09-12) Status still proper and desired Certified Copy of Priority Document(s) DELETION OF INVENTOR(S)
Signed statement attached deleting i. Х 14. (if foreign priority is claimed) inventor(s) named in the prior application, 15. see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). Other: *NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTIT FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28) 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: ☐ Continuation ☐ Divisional Continuation-in-part (CIP) of prior application No: Prior application information: Examiner Group/Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 17. CORRESPONDENCE ADDRESS 23400 or Correspondence address below (Insert Customer No. or Attach bar code label here) Name Address City Zip Code State

Name (Print/type)	DAVID G. POSZ	Registration No. (Attorney/Agent)	37,701	
Signature	DO R		ate	March 30, 2004

(703) 707-9110

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	Complete if Known					
FEE TRANSMITTAL	Application Number	_				
	Filing Date	March 30, 2004				
for FY 2004	First Named Inventor	HIGUCHI				
Effective 10/01/2003. Patent fees are subject to annual revision.	Examiner Name					
Applicant Claims small entity status. See 37 CFR 1.27	Art Unit					

TOTAL AMOUNT OF PAYMENT (\$) 810				Attorney Docket No. 11-244							
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)							
X Check Credit card Money Other None			3. ADDITIONAL FEES Large Entity Small Entity								
Deposit Accou	unt	Ī	ee	Fee (\$)	Fee Code	Fee (\$)	Fee Description		F	ee Paid	
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Account PO:	SZ & BETHARDS,	PLC	1052	50	2052	25	cover sheet				
	ner is authorized to: (check all ti	hat apply) 1	1053	130	1053	130	Non-English specificat	Non-English specification			
Charge fee(s) in	, , , , , , , , , , , , , , , , , , ,		1812	2,520	1812	2,520	For filing a request for ex parte reexamination				
X Charge any ad	ditional fee(s) during the pendency of the	nis application 1	1804	920*	1804	920*	Requesting publication Examiner action	of SIR prior to			
Charge fee(s) in to the above-identified	indicated below, except for the filling fee deposit account	1	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
10 1 10 200 TO 100 TO 100	FEE CALCULATION	1	1251	110	2251	55	Extension for reply with	within first month			
1. BASIC FILIN		 1	1252	420	2252	210	Extension for reply with		:h		
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Fee Fee Fe	ee Fee Fee Description ode (\$)	Fee Paid	1254	1,480	2254	740	Extension for reply with	nin fourth month	_	-	
	001 385 Utility filing fee		1255	2,010	2255	1005	Extension for reply with				
1002 340 20	002 170 Design filing fee	1	1401	330	2401	165					
1003 530 20	003 265 Plant filing fee	1	1402	330	2402	165					
1004 770 20	004 385 Reissue filing fee		1403	290	2403	145					
1005 160 20	005 80 Provisional filing fee	1	1451	1,510	1451	1,510	Petition to institute a p	ublic use procee	ding		
•	_	1	1452	110	2452	55	Petition to revive – una	navoidable			
	SUBTOTAL (1) (\$)	770	1453	1,330	2453	665	Petition to revive - uni	e unintentional			
2. EXTRA CLA	AIM FEES FOR UTILITY AN	D REISSUE 1	1501	1,330	2501	665	Utility issue fee (or reis	ssue fee (or reissue)			
	Fee from Extra Claims below	Fee Paid 1	1502	480	2502	240	Design issue fee				
Total Claims 11			1503	640	2503	320	Plant issue fee			I	
Independent 1	- 3**= 0 × 86	= 0 1	1460	130	1460	130	Petitions to the Commi	ssioner			
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Fee Fee Fe	ee Fee Fee Description		3021	40	8021	40	Recording each patent			40	
	ode (\$) 202 9 Claims in excess of	20 1	1809	770	2809	385	property (times number of properties)				
1201 86 22	201 43 Independent claims	in excess of 3	1810	770	2810	385	For each additional inv		-		
1203 290 22	203 145 Multiple dependent o	laim, if not paid 1	1801	770	2801	385	examined (37 CFR § 1 Request for Continued B		_{≣)}		
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** or number previously paid, if greater; For Reissues, see above				d by Bas	•	ee Paid	SUBTOT	Δ1 (3)	10.40		
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SUBMITTED BY								Complete (if a	pplicable)		
Name (Print/Type) DAVID G. POSZ				stration I rney/Age		37,70	01	Telephone	(703) 707-9110		
Signature	Tas	R						Date	March	30, 2004	

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